

| | | | |
|---------------------------------|---|-------------------------------|-----------------------------|
| <i>SERFF Tracking Number:</i> | <i>MUTM-126961068</i> | <i>State:</i> | <i>Arkansas</i> |
| <i>Filing Company:</i> | <i>Mutual of Omaha Insurance Company</i> | <i>State Tracking Number:</i> | <i>47585</i> |
| <i>Company Tracking Number:</i> | <i>JAMIE LUCY</i> | | |
| <i>TOI:</i> | <i>LTC03I Individual Long Term Care</i> | <i>Sub-TOI:</i> | <i>LTC03I.001 Qualified</i> |
| <i>Product Name:</i> | <i>Long Term Care Advertising - AFN40101-443_1010</i> | | |
| <i>Project Name/Number:</i> | <i>Long Term Care Advertising/AFN40101-443_1010</i> | | |

Filing at a Glance

Company: Mutual of Omaha Insurance Company

Product Name: Long Term Care Advertising - SERFF Tr Num: MUTM-126961068 State: Arkansas
AFN40101-443_1010

TOI: LTC03I Individual Long Term Care

SERFF Status: Closed-Filed-Closed

State Tr Num: 47585

Sub-TOI: LTC03I.001 Qualified

Co Tr Num: JAMIE LUCY

State Status: Filed-Closed

Filing Type: Advertisement

Reviewer(s): Harris Shearer,
Stephanie Fowler

Author: Jamie Lucy

Disposition Date: 01/20/2011

Date Submitted: 12/27/2010

Disposition Status: Filed-Closed

Implementation Date Requested:

Implementation Date:

State Filing Description:

General Information

Project Name: Long Term Care Advertising

Project Number: AFN40101-443_1010

Requested Filing Mode:

Explanation for Combination/Other:

Submission Type: New Submission

Overall Rate Impact:

Status of Filing in Domicile:

Date Approved in Domicile:

Domicile Status Comments:

Market Type: Individual

Individual Market Type:

Filing Status Changed: 01/20/2011

State Status Changed: 01/20/2011

Deemer Date:

Created By: Jamie Lucy

Submitted By: Jamie Lucy

Corresponding Filing Tracking Number:

Filing Description:

Please see cover letter under the supporting documentation tab.

Company and Contact

Filing Contact Information

Carly Cole, Product & Advertising Compliance carly.cole@mutualofomaha.com

Consultant

Mutual of Omaha

402-351-2476 [Phone]

Mutual of Omaha Plaza

402-351-5298 [FAX]

SERFF Tracking Number: MUTM-126961068 State: Arkansas
Filing Company: Mutual of Omaha Insurance Company State Tracking Number: 47585
Company Tracking Number: JAMIE LUCY
TOI: LTC03I Individual Long Term Care Sub-TOI: LTC03I.001 Qualified
Product Name: Long Term Care Advertising - AFN40101-443_1010
Project Name/Number: Long Term Care Advertising/AFN40101-443_1010

Omaha, NE 68175

Filing Company Information

| | | |
|-----------------------------------|-------------------------|--------------------------------|
| Mutual of Omaha Insurance Company | CoCode: 71412 | State of Domicile: Nebraska |
| Mutual of Omaha Plaza | Group Code: 261 | Company Type: Health Insurance |
| Omaha, NE 68175 | Group Name: | State ID Number: |
| (402) 351-6420 ext. [Phone] | FEIN Number: 47-0246511 | |

Filing Fees

| | |
|------------------|---------|
| Fee Required? | Yes |
| Fee Amount: | \$50.00 |
| Retaliatory? | No |
| Fee Explanation: | |
| Per Company: | No |

| COMPANY | AMOUNT | DATE PROCESSED | TRANSACTION # |
|-----------------------------------|---------|----------------|---------------|
| Mutual of Omaha Insurance Company | \$50.00 | 12/27/2010 | 43222613 |

| | | | |
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Correspondence Summary

Dispositions

| Status | Created By | Created On | Date Submitted |
|--------------|------------------|------------|----------------|
| Filed-Closed | Stephanie Fowler | 01/20/2011 | 01/20/2011 |

SERFF Tracking Number: *MUTM-126961068* *State:* *Arkansas*
Filing Company: *Mutual of Omaha Insurance Company* *State Tracking Number:* *47585*
Company Tracking Number: *JAMIE LUCY*
TOI: *LTC03I Individual Long Term Care* *Sub-TOI:* *LTC03I.001 Qualified*
Product Name: *Long Term Care Advertising - AFN40101-443_1010*
Project Name/Number: *Long Term Care Advertising/AFN40101-443_1010*

Disposition

Disposition Date: 01/20/2011

Implementation Date:

Status: Filed-Closed

Comment:

Rate data does NOT apply to filing.

| | | | |
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| <i>Project Name/Number:</i> | <i>Long Term Care Advertising/AFN40101-443_1010</i> | | |

| Schedule | Schedule Item | Schedule Item Status | Public Access |
|----------------------------|---------------------------|-----------------------------|----------------------|
| Supporting Document | Memorandum of Variability | Filed | Yes |
| Supporting Document | cover letter | Filed | Yes |
| Form | Website Page | Filed | Yes |

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Filing Company: Mutual of Omaha Insurance Company State Tracking Number: 47585

Company Tracking Number: JAMIE LUCY

TOI: LTC03I Individual Long Term Care Sub-TOI: LTC03I.001 Qualified

Product Name: Long Term Care Advertising - AFN40101-443_1010

Project Name/Number: Long Term Care Advertising/AFN40101-443_1010

Form Schedule

Lead Form Number: AFN40101-443_1010

| Schedule Item | Form Number | Form Type | Form Name | Action | Action Specific Data | Readability | Attachment |
|---------------------|-----------------------|-------------|--------------|---------|----------------------|-------------|---------------------------|
| Filed 01/20/2011 | AFN40101- 443_1010 | Advertising | Website Page | Initial | | 0.000 | AFN40101- 443_1010.pdf |



Long-Term Care Insurance



Want a long-term care insurance policy that's right for you?

Count on Mutual of Omaha Insurance Company to:

- ▶ Help protect your freedom by allowing you to get care at home
- ▶ Offer policy features you may not find from other companies
- ▶ Design a long-term care insurance policy that fits your needs
- ▶ Offer allowances that can help you save money
- ▶ Provide quality customer service and prompt payment of claims

A Mutual of Omaha insurance agent* can provide all the details.



Request your free copy of
**A Shopper's Guide to
Long-term Care Insurance**

Request your free booklet and learn more about Long-term Care insurance from Mutual of Omaha Insurance Company.

* Required Fields

First Name *

Last Name *

Address *

City *

State *

Zip *

Phone *

E-mail *

Age

Comments

Complete My Request ▶

This is a solicitation of insurance. By responding, you are requesting to have an insurance agent* contact you by telephone to provide additional information.



mutualofomaha.com

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* In WA: Producer

This is a solicitation of insurance. Long-term care insurance is underwritten by Mutual of Omaha Insurance Company, Mutual of Omaha Plaza, Omaha, NE 68175, mutualofomaha.com. Coverage may vary by state. An outline of coverage is available upon request. Policy forms: LTC09M, LTC09M-AG (or state equivalent). In ID: LTC09M-ID, LTC09M-AG-ID, In NY: LTC09M-NY, LTC09M-AG-NY, In OK: LTC09M-OK, LTC09M-AG-OK, In OR: LTC09M-AG-5ML-10ML-OR, In PA: LTC09M-PA, LTC09M-AG-PA, In TX: LTC09M-TX, LTC09M-AG-TX, In WA: LTC09M-WA, LTC09M-AG-WA, LTC04I-TQ, LTC04I-AG-TQ (or state equivalent). These policies have exceptions and limitations. For costs and complete details of the coverage, call or write your insurance agent or the company.

AFN40101-443_1010



Long-Term Care Insurance

Thank you.

Thank you for your interest in our Long-Term Care Insurance products.
A Mutual of Omaha insurance agent will contact you. There's no obligation to purchase anything.

We look forward to speaking with you.

[« Return to Long-Term Care Insurance Home](#) | [Subscribe today to our FREE E-newsletter »](#)

mutualofomaha.com

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Supporting Document Schedules

| | | | |
|---------------------------|---------------------------|---------------------|---------------|
| | | Item Status: | Status |
| | | | Date: |
| Satisfied - Item: | Memorandum of Variability | Filed | 01/20/2011 |
| Comments: | | | |
| Attachment: | | | |
| AFN40101-443_1010 MOV.pdf | | | |

| | | | |
|--------------------------|--------------|---------------------|---------------|
| | | Item Status: | Status |
| | | | Date: |
| Satisfied - Item: | cover letter | Filed | 01/20/2011 |
| Comments: | | | |
| Attachment: | | | |
| AR letter app.pdf | | | |

VARIABLE MATERIAL FOR ADVERTISING FORM

AFN40101-443_1010

The following information in the aforementioned advertisement is bracketed to denote variable material.

Section

Disclosure for NH only will be at the top of page.

Explanation

[The purpose of this communication is the solicitation of insurance. Contact will be made by an insurance agent or insurance company.]

Heading: The top of the text section on the left side of the page.

The heading may change between the following. Headings:

1. Want a long-term care insurance policy that's right for you?
2. Help protect what's important to you
3. When a nursing home is not part of your plan
4. Looking for long-term care insurance?

Sub-Headings: On the left side of the page under the Heading

Under the heading, the sub-heading will be one of the phrases listed below. The words in brackets will either be in the Sub-Heading or in the bullet, but they need to be variable to make sure that all of the combinations make sense. "Help" will appear in either the sub-heading or the bullet on any of them that have it as a variable.

1. Count on Mutual of Omaha Insurance Company to:
 - 2.A long-term care insurance policy may [help] [you]:
 - 3.Count on Mutual Of Omaha to:
 - 4.A Mutual of Omaha insurance agent* may [help]:

Bullets: The main text area under the Sub-Heading. There will be several under each Sub-Heading.

The bullets will be switched out to find combinations that work well together. Like the sub-headings, there is a variable "help" listed on some of them. Again, it will either appear on the bullet or in the sub-heading.

1. Offer policy features you may not find from other companies.
2. Design a long-term care insurance policy that fits your needs
3. Offer allowances that can help you save money
4. [Help] protect your family from the burden of caring for you
5. [Help] protect your finances from the high cost of long-term care services
6. [Help] protect your freedom by allowing you to get care at home
7. [Help] spend your life savings the way your planned
8. [Help] leave an inheritance for your children and grandchildren

9. [Help] get the care you need in your own home
10. [Help] enjoy your family and friends in comfortable, familiar surroundings
11. [Help] avoid spending your life savings on long-term care services
12. [Help] preserve your lifestyle and independence
13. Offer affordable long-term care insurance premiums
14. Allow you to tailor a policy to meet your needs
15. Provide quality customer service and prompt payment of claims

Endings: Under the bullets

The Endings will be tested between the following:

1. A Mutual of Omaha insurance agent* can provide all the details
2. A Mutual of Omaha insurance agent* can show you how

Contact Information Box:

Request your free booklet and learn more about Long-Term Care insurance from Mutual of Omaha Insurance company

Button:

1. Complete My Request
2. Learn More
3. Submit My Request

Picture

The picture used is just a placeholder. The picture may change, but will be similar to the one shown and represent the topic of Long-Term Care.

*In WA: producer

MUTUAL OF OMAHA INSURANCE COMPANY

Mutual of Omaha Plaza, Omaha, NE 68175, 402-342-7600



December 27, 2010

Arkansas Department of Insurance
Attn: Compliance - Life & Health
1200 West Third Street
Little Rock, AR 72201-1904

NAIC #261-71412
FEIN #47-0246511
Mutual of Omaha Insurance Company
Long-Term Care Advertising
Website Page: AFN40101-443_1010

Enclosed for review by your Department is a copy of the above-captioned advertising. The form is new and is not intended to replace any previously approved form. It will be used with appropriate approved forms in your state.

This website page is being used as a source of leads in the solicitation of our Long-Term Care Insurance.

We request that any information in brackets be considered variable. A Memorandum of Variable Material describing the variable items is attached.

Your notice of acceptance of this filing will be greatly appreciated.

Sincerely,

Product and Advertising Compliance
Regulatory Affairs

For questions, please contact Carly Cole
Phone: 402-351-2476; Fax: 402-351-5298
Email: advfilings@mutualofomaha.com

jl